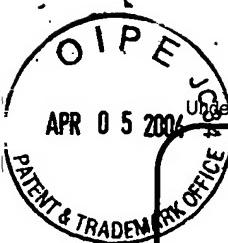


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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	M319
First Named Inventor	Jack Chen
<b>COMPLETE IF KNOWN</b>	
Application Number	10/722,798
Filing Date	11/26/2003
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## Method and Apparatus for Controlling Multiplexed Motors

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/26/2003 as United States Application Number or PCT International

Application Number 10/722,798 and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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or Bar Code Label

OR



Correspondence address below

Robert L. Marsh

**Name**

P. O. Box 4468

**Address**

Wheaton City	Illinois State	60189-4468 ZIP
U.S.A. Country	630-681-7500 Telephone	630-681-3464 Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :**  A petition has been filed for this unsigned inventor

Given Name Jack (first and middle [if any])	Family Name Chen
--	------------------

Inventor's Signature 	Feb 12, 2004		
Oak Brook Residence: City	Illinois State	U.S.A. Country	U.S.A. Citizenship

14 Kimberly Circle

**Mailing Address**

Oak Brook City	Illinois State	60521 ZIP	U.S.A. Country
-------------------	-------------------	--------------	-------------------

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name Kenneth (first and middle [if any])	Family Name Such
---	------------------

Inventor's Signature 	12/26/04		
North Barrington Residence: City	Illinois State	U.S.A. Country	U.S.A. Citizenship

231 Biltmore Drive

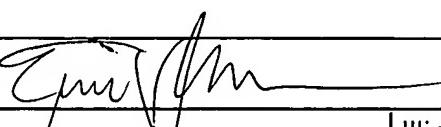
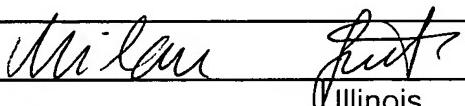
**Mailing Address**

North Barrington City	Illinois State	60010 ZIP	U.S.A. Country
--------------------------	-------------------	--------------	-------------------

 Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1**

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Eric Given Name 		Gonzales Family Name or Surname	
Inventor's Signature		Date 02-12-04	
Aurora Residence: City	Illinois State	U.S.A. Country	U.S.A. Citizenship
3013 Peachtree Circle Mailing Address			
Mailing Address			
Aurora City	Illinois State	60504 ZIP	U.S.A. Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Jeremy Given Name 		Waldrop Family Name or Surname	
Inventor's Signature		Date 2/12/2004	
Aurora Residence: City	Illinois State	U.S.A. Country	U.S.A. Citizenship
1557 Golden Oaks Parkway Mailing Address			
Mailing Address			
Aurora City	Illinois State	60506 ZIP	U.S.A. Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Milan Given Name 		Sebek Family Name or Surname	
Inventor's Signature		Date 02/12/04	
Lisle Residence: City	Illinois State	U.S.A. Country	U.S.A. Citizenship
4461 Brittany Drive Mailing Address			
Mailing Address			
Lisle City	Illinois State	60532 ZIP	U.S.A. Country

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U.S. PATENT &amp; TRADEMARK OFFICE

**POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Jack Chen
Title	Method & Apparatus for Controlling
Group Art Unit	Multiplexed Motors
Examiner Name	
Attorney Docket Number	M319

I hereby appoint:

- Practitioners at Customer Number   → Place Customer Number Bar Code Label here
- OR
- Practitioner(s) named below:

Name	Registration Number
Robert L. Marsh	25894

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

- The above-mentioned Customer Number.
- OR
- Practitioners at Customer Number   → Place Customer Number Bar Code Label here
- OR

<input checked="" type="checkbox"/> Firm or Individual Name	Robert L. Marsh			
Address	P. O. Box 4468			
Address				
City	Wheaton	State	IL	Zip 60189-4468
Country	U.S.A.			
Telephone	630-681-7500	Fax	630-681-3464	

I am the:

- Applicant/Inventor.
- Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

**SIGNATURE of Applicant or Assignee of Record**

Name	Jack Chen
Signature	
Date	Feb 12, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 \*Total of forms are submitted.

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PTO/SB/81 (02-01)

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Jack Chen
Title	Method & Apparatus for Controlling
Group Art Unit	Multiplexed Motors
Examiner Name	
Attorney Docket Number	M319

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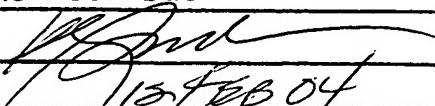
<input checked="" type="checkbox"/> Firm or Individual Name	Robert L. Marsh			
Address	P. O. Box 4468			
Address				
City	Wheaton	State	IL	Zip 60189-4468
Country	U.S.A.			
Telephone	630-681-7500	Fax	630-681-3464	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Kenneth Such
Signature	
Date	13 FEB 04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Jack Chen
Title	Method & Apparatus for Controlling
Group Art Unit	Multiplexed Motors
Examiner Name	
Attorney Docket Number	M319

I hereby appoint:

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OR  
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Robert L. Marsh	25894

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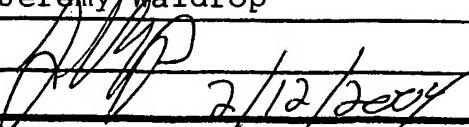
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### SIGNATURE of Applicant or Assignee of Record

Name	Jeremy Waldrop
Signature	
Date	2/12/2004

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Jack Chen
Title	Method & Apparatus for Controlling
Group Art Unit	Multiplexed Motors
Examiner Name	
Attorney Docket Number	M319

I hereby appoint:\*

Practitioners at Customer Number

OR

Practitioner(s) named below:

Name	Registration Number
Robert L. Marsh	25894

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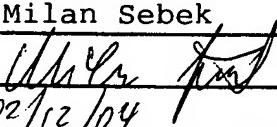
<input checked="" type="checkbox"/> Firm or Individual Name	Robert L. Marsh			
Address	P. O. Box 4468			
Address				
City	Wheaton	State	IL	Zip 60189-4468
Country	U.S.A.			
Telephone	630-681-7500	Fax	630-681-3464	

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Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Milan Sebek
Signature	
Date	02/12/04

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Jack Chen
Title	Method & Apparatus for Controlling
Group Art Unit	Multiplexed Motors
Examiner Name	
Attorney Docket Number	M319

I hereby appoint:

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**OR**  
 Practitioner(s) named below:

Name	Registration Number
Robert L. Marsh	25894

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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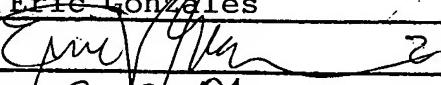
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**OR**  
 Practitioners at Customer Number   → Place Customer Number Bar Code Label here  
**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Robert L. Marsh		
Address	P. O. Box 4468		
Address			
City	Wheaton	State	IL
Country	U.S.A.		
Telephone	630-681-7500	Fax	630-681-3464

I am the:

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 Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Eric Gonzales
Signature	
Date	2-2-04

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